

SENATE BILL No. 461

DIGEST OF INTRODUCED BILL

Citations Affected: IC 16-21-6-7; IC 16-49-3-3; IC 20-34-4; IC 36-7-8-3.

Synopsis: State department of health matters. Specifies that hospital discharge information filed with the state department of health (state department) is confidential except under specified circumstances. Further specifies the circumstances for the review of the death of a child by a local child fatality review team. Allows a local child fatality review team to review the near fatality or serious injury of a child. Adds hepatitis A to the list of school children immunizations. Requires the state department, before November 30 of each year, to publish a two year immunization calendar. Provides information to parents of grade 6 students concerning the human papillomavirus (HPV) infection. (Current language provides this information only to parents of female grade 6 students.) Requires the state department to provide the department of education with immunization materials and requires the materials to be distributed to students' parents and guardians. Requires a health care provider who administers an immunization to enter the information into the state immunization registry. Requires a school corporation to ensure that immunization information is complete in the state immunization registry not later than the first Friday in February. Specifies that onsite sewage systems of private homes built by the individual are required to comply with state laws and rules.

Effective: July 1, 2015.

Miller Patricia

January 14, 2015, read first time and referred to Committee on Health & Provider Services.



First Regular Session 119th General Assembly (2015)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2014 Regular Session and 2014 Second Regular Technical Session of the General Assembly.

SENATE BILL No. 461

A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 16-21-6-7 IS AMENDED TO READ AS
2 FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 7. (a) The reports filed
3 under section 3 of this chapter:
4 (1) may not contain information that personally identifies a
5 patient or a consumer of health services; and
6 (2) must be open to public inspection.
7 (b) The state department shall provide copies of the reports filed
8 under section 3 of this chapter to the public upon request, at the state
9 department's actual cost.
10 (c) The following apply to information that is filed ~~under section 6~~
11 ~~of this chapter~~:
12 ~~(1) Information filed~~
13 with the **state department**, the state department's designated
14 contractor, **or transferred to the state department by the state**
15 **department's designated contractor under section 6 of this chapter**:
16 ~~(A)~~



(1) Except as provided in subsection (e), the information is confidential. ~~and~~

~~(B)~~

(2) The information must be transferred by the contractor to the state department in a format determined by the state department.

~~(2) Information filed with the state department or transferred to the state department by the state department's designated contractor is not confidential; except that information that:~~

~~(A) personally identifies; or~~

~~(B) may be used to personally identify;~~

~~a patient or consumer may not be disclosed to a third party other than to a hospital that has filed inpatient and outpatient discharge information.~~

(d) An analysis completed by the state department of information that is filed under section 6 of this chapter:

(1) may not contain information that personally identifies or may be used to personally identify a patient or consumer of health services, unless the information is determined by the state department to be necessary for a public health activity;

(2) must be open to public inspection; and

(3) must be provided to the public by the state department upon request at the state department's actual cost.

(e) Information provided under section 6 of this chapter may only be released or made public by the state department if at least one (1) of the following circumstances applies:

(1) The use of the information by the state department:

(A) is to comply with the requirements of this chapter; or

(B) is released for statistical purposes in a manner that does not identify an individual.

(2) At the state department's discretion, for research purposes with identifiable information being released only if:

(A) the person requesting the information states in writing to the state department:

(i) the purpose, including any intent to publish findings, and the nature of the data sought;

(ii) the personal information that is required; and

(iii) the safeguards the person will take to protect the identity of the data subjects;

(B) the proposed safeguards in clause (A)(iii) are adequate to prevent the identify of an individual data subject from being known;

(C) the researcher executes an agreement with the state



department, on a form approved by the oversight committee on public records, that:

- (i) incorporates the safeguards for the protection of individual data subjects;
- (ii) defines the scope of the research project; and
- (iii) informs the researcher that failure to abide by the conditions of the approved agreement constitutes a breach of contract and could result in civil litigation by the data subject;

(D) the researcher agrees to pay any costs of the research; and

(E) the state department maintains a copy of the agreement or contract for the life of the record.

SECTION 2. IC 16-49-3-3, AS ADDED BY P.L.119-2013, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 3. (a) A local child fatality review team:

(1) shall review the death of a child ~~that~~ **whose death incident** occurred in the area served by the local child fatality review team if:

(A) the death of the child is:

(i) sudden;

(ii) unexpected;

(iii) unexplained; or

(iv) assessed by the department of child services for alleged abuse or neglect that resulted in the death of the child; or

(B) the coroner in the area ~~served by the local child fatality review team~~ **where the death occurred** determines that the cause of the death of the child is:

(i) undetermined; or

(ii) the result of a homicide, suicide, or accident; **and**

(2) **may, at its discretion, review the near fatality of a child whose incident or injury occurred in the area served by the local child fatality review team.**

(b) In conducting a child fatality review under subsection (a), the local child fatality review team may review all applicable records and information related to the death **or near fatality** of the child, including the following:

(1) Records held by the:

(A) local or state health department; and

(B) department of child services.

(2) Medical records.



(3) Law enforcement records.

(4) Autopsy reports.

(5) Records of the coroner.

(6) Mental health reports.

(c) Except as otherwise provided under this article, information and records acquired by the local child fatality review team in the exercise of its duties under this chapter are confidential and exempt from disclosure.

(d) Records, information, documents, and reports acquired or produced by a local child fatality review team are not:

(1) subject to subpoena or discovery; or

(2) admissible as evidence;

in any judicial or administrative proceeding. Information that is otherwise discoverable or admissible from original sources is not immune from discovery or use in any proceeding merely because the information was presented during proceedings before a local child fatality review team.

SECTION 3. IC 20-34-4-1, AS AMENDED BY P.L.2-2007, SECTION 231, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 1. (a) Each school shall keep an immunization record of the school's students ~~The records must be kept uniformly throughout Indiana~~ according to procedures prescribed by the state department of health.

(b) Whenever a student transfers to another school, the school from which the student is transferring may furnish, not later than twenty (20) days after the transfer, a copy of the student's immunization record to the school to which the student is transferring.

(c) Whenever a student enrolls in a state educational institution, the school from which the student graduated may furnish a copy of the student's immunization record to the state educational institution. If the student is enrolled in a state educational institution while still attending a secondary level school, the secondary level school that the student is attending may furnish a copy of the student's immunization record to the state educational institution.

SECTION 4. IC 20-34-4-2, AS AMENDED BY P.L.161-2009, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 2. (a) Every child residing in Indiana **who is enrolled in a state or accredited elementary school or high school** shall be immunized **as determined by the state department of health** against:

(1) diphtheria;

(2) pertussis (whooping cough);



- (3) tetanus;
- (4) measles;
- (5) rubella;
- (6) poliomyelitis; and
- (7) mumps;
- (8) varicella;**
- (9) hepatitis A;**
- (10) hepatitis B; and**
- (11) meningitis.**

(b) Every child residing in Indiana who enters kindergarten or grade
 † shall be immunized against hepatitis B and chicken pox.

(c) The state department of health shall adopt rules under IC 4-22-2
 to require school age children to receive additional immunizations
 against the following:

- (1) Meningitis.
- (2) Varicella.
- (3) Pertussis (whooping cough).

The additional immunizations required under the rules shall include an
 immunization booster if considered appropriate by the state
 department.

(d) (b) The state department of health may expand or otherwise
 modify the list of communicable diseases that require documentation
 of immunity as medical information becomes available that would
 warrant the expansion or modification in the interest of public health.

(c) Before November 30 of each year, the state department of
 health shall publish a two (2) year calendar of immunization
 requirements and recommendations. The calendar must include:

- (1) the immunization requirements for the following school
 year; and
- (2) recommendations for immunization requirements for the
 year subsequent to the following school year.

(d) The publishing time frame for the calendar described in
 subsection (c) does not apply in the event of an:

- (1) emergency;
- (2) outbreak; or
- (3) extreme situation;

as determined by the state health commissioner.

(e) The state department of health shall adopt rules under IC 4-22-2
 specifying the:

- (1) required immunizations;
- (2) child's age for administering each vaccine;
- (3) adequately immunizing doses; and



(4) method of documentation of proof of immunity.

SECTION 5. IC 20-34-4-3, AS AMENDED BY P.L.80-2007, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 3. (a) Each school shall notify each parent of a student who enrolls in the school of the requirement that the student must be immunized and that the immunization is required for the student's continued enrollment, attendance, or residence at the school unless:

(1) the parent or student provides the appropriate documentation of immunity;

(2) ~~for chicken pox, the parent or student provides a written signed statement that the student has indicated a history of chicken pox; or~~

~~(3)~~ (2) IC 20-34-3-2 or IC 20-34-3-3 applies.

(b) A school that enrolls grade 6 ~~female~~ students shall provide each parent of a ~~female~~ student who is entering grade 6 with information prescribed by the state department of health under subsection (c) concerning the link between ~~cervical~~ cancer and the human papillomavirus (HPV) infection and that an immunization against the human papillomavirus (HPV) infection is available.

(c) The state department of health shall provide a school described in subsection (b) with the information concerning ~~cervical~~ cancer and the human papillomavirus (HPV) infection required in subsection (b). The information must include the following:

(1) The latest scientific information on the immunization against the human papillomavirus (HPV) infection and the immunization's effectiveness against causes of ~~cervical~~ cancer.

(2) That a pap smear is still critical for the detection of precancerous changes in the cervix to allow for treatment before cervical cancer develops.

(3) Information concerning the means in which the human papillomavirus (HPV) infection is contracted.

(4) A statement that any questions or concerns concerning immunizing the child against human papillomavirus (HPV) could be answered by contacting a health care provider.

(d) The state department of health may provide the department of education with material concerning immunizations and immunization preventable diseases for distribution to parents and guardians. The department of education shall provide these materials to schools to be provided to students' parents and guardians. These materials may be distributed by a school by posting the required information on the school's Internet web site.



SECTION 6. IC 20-34-4-4, AS ADDED BY P.L.1-2005, SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 4. (a) The parent of any student who has not received the immunizations required under this chapter shall present the student to a ~~physician and request the physician~~ **health care provider authorized to administer the immunizations. If the parent is unable to secure the immunizations, the local health department serving the area in which the student resides may provide the immunizations. Vaccines provided by the local health department shall be furnished by the local health board or the state department of health from available supplies.**

(b) The ~~physician~~ **health care provider** who administers the required ~~vaccines~~ **immunizations** to a student ~~or the health care provider's designee~~ shall give a certificate or other documentation of the immunizations to the individual who presented the student for immunization. This certificate or other documentation shall be presented on request to the local health department or the local health department's authorized representative. ~~enter the immunization information into the state immunization registry in accordance with IC 16-38-5.~~

SECTION 7. IC 20-34-4-5, AS ADDED BY P.L.1-2005, SECTION 18, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 5. (a) Each school shall require the parent of a student who has enrolled in the school to furnish, not later than the first day of school a ~~written statement of the student's immunization, accompanied by the physician's certificates or other documentation, unless a written statement of this nature is on file with the school.~~ **attendance, proof of the student's immunization status, either as a written document from the health care provider who administered the immunization or documentation provided from the state immunization registry.**

(b) The statement must show, except for a student to whom IC 20-34-3-2 or IC 20-34-3-3 applies, that the student has been immunized as required under section 2 of this chapter. The statement must include the student's date of birth and the date of each immunization.

(c) A student may not be permitted to attend school beyond the first day of school without furnishing the ~~written statement,~~ **documentation described in subsections (a) and (b)** unless:

- (1) the school gives the parent of the student a waiver; or
- (2) the local health department or a ~~physician~~ **health care provider** determines that the student's immunization schedule has been delayed due to extreme circumstances and that the required immunizations will not be completed before the first day of



1 school.

2 The waiver referred to in subdivision (1) may not be granted for a
3 period that exceeds twenty (20) **school** days. If subdivision (2) applies,
4 the parent of the student shall furnish the written statement and a
5 schedule, approved by a **physician health care provider who is**
6 **authorized to administer the immunizations** or the local health
7 department, for the completion of the remainder of the immunizations.

8 (d) The state department of health may commence an action against
9 a school under IC 4-21.5-3-6 or IC 4-21.5-4 for the issuance of an order
10 of compliance for failure to enforce this section.

11 (e) Neither a religious objection under IC 20-34-3-2 nor an
12 exception for the student's health under IC 20-34-3-3 relieves a parent
13 from the reporting requirements under this section.

14 (f) The state department of health shall adopt rules under IC 4-22-2
15 to implement this section.

16 SECTION 8. IC 20-34-4-5.5 IS REPEALED [EFFECTIVE JULY
17 1, 2015]. Sec. 5.5: (a) Each school that enrolls grade 6 female students
18 shall require the parent of a female student entering grade 6 to furnish
19 not later than the twenty (20) school days after the first day of school
20 a written statement prescribed by the state department of health under
21 subsection (b) stating that the parent has received the information
22 required under section 3(b) of this chapter and that:

- 23 (1) the student has received or is receiving the immunization;
- 24 (2) the parent has decided not to have the student immunized; or
- 25 (3) the parent chooses not to provide the information to the school
26 concerning whether the student was immunized;

27 against the human papillomavirus (HPV) infection.

28 (b) The state department of health shall prescribe the format for the
29 written statement required under subsection (a):

30 (c) A student may not be prevented from enrolling in, attending, or
31 graduating from school for the sole reason that the student has not
32 provided the school with the written statement required under this
33 section.

34 SECTION 9. IC 20-34-4-6, AS AMENDED BY P.L.80-2007,
35 SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
36 JULY 1, 2015]: Sec. 6. (a) **The state department of health shall**
37 **collect immunization data on school age children using the state**
38 **immunization registry. Each school corporation shall ensure that**
39 **all applicable immunization information is complete in the state**
40 **immunization registry** not later than sixty (60) days after the
41 enrollment of students for the first time and when additional
42 immunizations are required by statute or rule; each school shall file a



1 written report with the state department of health and the local health
2 department having jurisdiction. The report must include the following:

3 (1) A statement of the number of students who have demonstrated
4 immunity against diphtheria; pertussis (whooping cough); tetanus;
5 measles; rubella; poliomyelitis; mumps; and hepatitis B-

6 (2) A statement of the number of students who have not
7 demonstrated immunity against the illnesses listed in subdivision
8 (1);

9 (3) A statement of the number of students who have been found
10 positive for sickle cell anemia or lead poisoning;

11 (4) Beginning in the 2008-2009 school year, a statement of the
12 number of female students in grade 6 who:

13 (A) have or will have; and

14 (B) have not;

15 been immunized against human papillomavirus (HPV) infection;
16 and the number of female students in grade 6 whose parent chose
17 not to provide the information to the school concerning whether
18 the student was immunized.

19 **the first Friday in February each year. The state department of**
20 **health shall use the data to create aggregate reports.**

21 (b) The state department of health and the local health department
22 shall, for good cause shown that there exists a substantial threat to the
23 health and safety of a student or the school community, be able to
24 validate immunization reports by onsite reviews or examinations of
25 nonidentifying immunization record data. This section does not
26 independently authorize the state department of health, a local
27 department of health, or an agent of the state department of health or
28 local department of health to have access to identifying medical or
29 academic record data of individual students attending nonaccredited
30 nonpublic schools.

31 (c) A school shall file a report for each student who enrolls after the
32 filing of the report for students who enrolled at the beginning of the
33 school year. The state department of health has exclusive power to
34 adopt rules for the administration of this section.

35 SECTION 10. IC 36-7-8-3 IS AMENDED TO READ AS
36 FOLLOWS [EFFECTIVE JULY 1, 2015]: Sec. 3. (a) The legislative
37 body of a county having a county department of buildings or joint
38 city-county building department may, by ordinance, adopt building,
39 heating, ventilating, air conditioning, electrical, plumbing, and
40 sanitation standards for unincorporated areas of the county. These
41 standards take effect only on the legislative body's receipt of written
42 approval from the fire prevention and building safety commission.



1 (b) An ordinance adopted under this section must be based on
2 occupancy, and it applies to:

3 (1) the construction, alteration, equipment, use, occupancy,
4 location, and maintenance of buildings, structures, and
5 appurtenances that are on land or over water and are:

6 (A) erected after the ordinance takes effect; and

7 (B) if expressly provided by the ordinance, existing when the
8 ordinance takes effect;

9 (2) conversions of buildings and structures, or parts of them, from
10 one occupancy classification to another; and

11 (3) the movement or demolition of buildings, structures, and
12 equipment for the operation of buildings and structures.

13 (c) The rules of the fire prevention and building safety commission
14 are the minimum standards upon which ordinances adopted under this
15 section must be based.

16 (d) An ordinance adopted under this section does not apply to
17 private homes that are built by individuals and used for their own
18 occupancy. **However, onsite sewage systems of a private home**
19 **described in this subsection must comply with state laws and rules.**

